

# THE GLUE THAT HOLDS THE PRESBYOPIC PRACTICE TOGETHER

Making CK An Integral Part Of Your Practice

A CK Case Study: Daniel S. Durrie, MD — *Durrie Vision, Overland Park, Kansas*

*Daniel S. Durrie is an associate clinical professor at Kansas University Medical Center, Kansas City, and is in private practice in Overland Park, Kansas. He currently performs up to 50 NearVisionCK treatments per month and has completed thousands of CK treatments over the past several years. He sees CK as an integral component of the emerging ophthalmic practice that focuses on the ongoing treatment of presbyopia.*

## Where CK Fits

“CK is the glue that holds the presbyopic practice together,” says Durrie. “CK is an integral part of my presbyopic practice because it brings in new patients who want to get rid of their reading glasses. It is a procedure that can be used in the interim before patients need cataract surgery and implantation of an IOL, and sets the stage for that future surgery.

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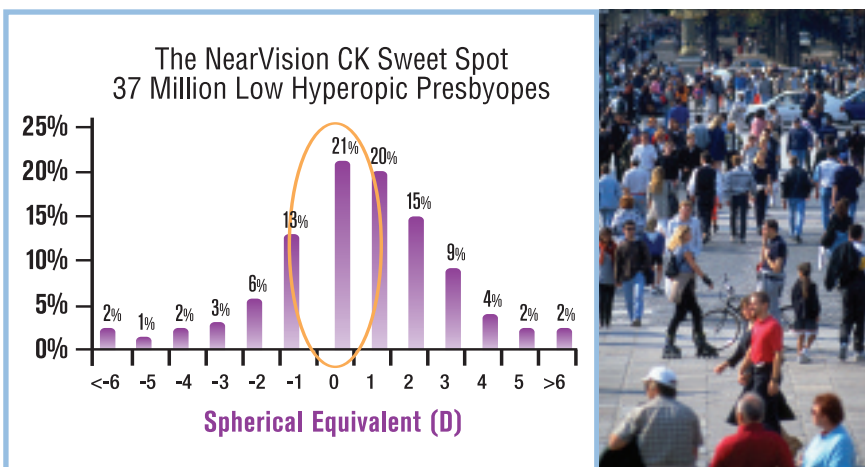
between -0.75D to +1.00D). With LASIK, we have created millions of additional patients who will eventually develop presbyopia. I find that even patients who have had successful LASIK and develop

presbyopia are attracted to the idea of a bladeless, relatively simple radiofrequency treatment.”

## Emerging Applications For CK

“Surgeons who have been performing CK in their practices have found that one of the best candidates for CK is the patient who has had successful LASIK or PRK in the past. These patients have had their distance refractive problems solved and now, years later, they are developing near vision problems,” says Durrie.

Durrie has embarked on the multi-center investigational device exemption (IDE) study to gauge the



success of CK in a post-LASIK application. The study to date involves 50 patients, aged 40 years or older, who received treatment with CK (eight spots at an 8-mm optical zone). To date, he has found the treatments safe and effective. “There were no adverse effects on the LASIK flap and there were no unusual occurrences during the surgery. The surgery proceeded exactly like our CK on virgin eyes,” says Durrie.

Durrie and other CK surgeons are finding that CK is also a good solution for older patients who have undergone cataract surgery, but did not have an advanced IOL implanted. In addition, CK can be used to treat patients who had an IOL implanted but developed mild hyperopia (+0.5D to +1.0D). In this case, CK eliminates the need to exchange an IOL and also improves the patient’s near vision.

Durrie believes that CK is critical to his success in moving from a

typical refractive practice to becoming what he describes as an “anti-aging” practice, where ophthalmologists can benefit from the dramatic market potential of treating presbyopia.

Says Durrie: “CK is appropriate for patients with plano presbyopia who want to become spectacle-free during their normal activities, such as reading a restaurant menu, cell phone, or newspaper. The surgeon can do the procedure on one eye with minimal surgery, solve the visual problem, and have a very satisfied patient.

“Undergoing CK does not mean the patient will not need another refractive procedure with aging. A year or so after the initial CK, he or she may need an enhancement or may graduate to implantation of a presbyopic IOL.”

As such, he positions CK as the first line of defense against the aging

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eye, and as a “bridge” treatment for the presbyopic patient before they eventually need cataract surgery.

### ***Anti-Aging: A New Perspective On CK***

According to Durrie, now that CK is being joined in the marketplace by other approved presbyopic solutions, such as multifocal and accommodating IOLs, it may be time for a new perspective when talking about, implementing and ultimately marketing CK to patients. This perspective positions CK as an “anti-aging” treatment.

“Today’s aging baby boomers are a distinct demographic group. They have decided it is worthwhile to spend the money to stave off the signs and symptoms of aging. For these patients, the price of ophthalmic care — and most everything else in their lives — is not a major motivating factor. They are looking for an ophthalmologist



NearVision CK is ideal for patients who want to enjoy life’s everyday activities without reading glasses.

who will be with them over the long term as they age,” says Durrie.

Understanding the true motivation of patients, and realizing that staving off the effects of aging is the goal of the presbyopic patient, changes the value proposition of CK. “We know from studies and from our own experience over 7 years of performing CK that regression of the CK effect, while it does sometimes happen, is not necessarily a function of the CK treatment itself. The primary reason for CK enhancement is simply the continuation of the aging process. When I explain it this way to patients, staff and referring doctors, I find they easily grasp that there can be no lifetime guarantees for a natural part of the aging process.”

### ***Talking To Prospective CK Patients***

For Durrie, the CK conversation always starts with an honest discussion about today and tomorrow. As part of these conversations, he explores the existing state of the patient’s vision. Equally important, he tries to look into the future and describe the vision care road map that will enable patients to preserve their vision quality over the years. “In this way, patients already know that we’re the place to come to preserve their vision long-term,” says Durrie. “We really want to partner with

them so they can have the best vision over their lifetime.”

He’s also direct and up-front about the cost of every treatment, and essentially offers a fee schedule that spells out all of the possibilities. Says Durrie: “I charge \$1,850 for CK, which is close to the average fee across the U.S. (for one eye). If they need additional CK during the first year, I just charge them a \$150 facility fee. And I tell them it’s a facility fee and I’m not charging them anything and they understand

to do in the future, and how much it is going to cost.”

### ***Building An Ongoing Annuity Stream***

Seeing how CK fits into a broader continuum of presbyopic care requires a parallel shift in how we view our business model. Durrie believes that becoming an “anti-aging” surgeon means that, for the first time, practices can move from what has been a disposable income-based model to a true

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***“We help patients establish a vision care road map that will enable them to preserve their vision quality over the years.”***

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that. If it’s after a year, they get a half-price CK enhancement, so that would be \$925. And if they go on to an advanced IOL, they get a \$1,200 discount on the IOL.

“It’s interesting how these patients just light up when things are spelled out in this way, because they can tell I’m on their side. I’m trying to look at the economics for them, as well as give them vision for a lifetime. I don’t mind telling them all this up front; in the CK exam, I’ll let them know what we might have

annuity-based model in which individual patients can represent recurring revenue over time.

Says Durrie: “The classic cataract surgery or LASIK surgery business model requires a constant inflow of patients, requiring expensive, complex marketing and co-management programs to maintain patient demand. With a well-structured anti-aging surgery program, patients will stay in a practice, helping it grow.

“I build in the expectation for future surgeries from the beginning of the consultation. I tell all my patients they will receive a discount on their second CK treatment, whether it is needed in 6 to 12 months, or in 3 years. I also tell patients they will receive a discount on a refractive lensectomy or other refractive procedure if they choose to have them performed in our practice, essentially bundling three surgeries into one procedure.”

### ***CK Is Positioned For Success***

Durrie is confident that CK has found a valuable slot within the presbyopic practice.

“I believe CK has found its ‘sweet spot’ as a treatment for patients with emmetropic and low hyperopic presbyopia — those who see well at distance but do not like wearing reading glasses. In the 4 years that CK has been on the market, even physicians who were initially skeptical about collagen shrinkage treatments have had to acknowledge it works well for this patient population.”